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CONFIRMATION NO. 3490

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/686,541	10/15/2003 RULE	362	3754	C-0130.07

APPLICANTS

Vito Cellini, San Antonio, TX;
 Richard W. Martin, San Antonio, TX;
 L. David Parker, Quinlan, TX;

** CONTINUING DATA *****

This application is a CIP of 09/970,095 10/03/2001 PAT 6,786,368
 which is a CIP of 09/850,308 05/07/2001 ABN

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **
 01/21/2004

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Verified and Acknowledged	/MELVIN A CARTAGENA/ Examiner's Signature	Initials	TX	2	20	2

ADDRESS

LAW OFFICES OF CHRISTOPHER L. MAKAY
 1634 MILAM BUILDING
 115 EAST TRAVIS STREET
 SAN ANTONIO, TX 78205-1763
 UNITED STATES

TITLE

Self-defense and safety tool

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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